PATE	NT APPLICATION			ON RECORD	dolmation unli	SS 11 displ	Bys y valid OMB Boy I'll Dockey o	control nymber
Substitute for Form PTO-875						UT	7698	7894
	SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY				
FOR	NUMBER FILE	unn	SER EXTR4	PATE	· FEE	1 ′.		· .
848 0 FEP (37 CFR 1,16(a))	1	,	e	1	S		RATE.	FEE
TOTAL CLAIMS (37 CFR 1.16(c))	minus	20. =	: .	X S . =	 	OR	 	
(37 CFR 1.16(b))	minús	3 =	.:-	1	 	OR	X S = .	
MULTIPLE DEPENDENT	X S =	 	OR	×3	<u> </u>			
if the difference in colum	+ <u>\$</u>		OR	<u>+s</u> =	<u> </u>			
	TOTAL		OR	TOTAL	<u> </u>			
	MS AS AMEŅDEI	7-PARTII			•	• • •		
12 2321 "	Column 1)	(Column 2)	(Column 31	SMALL	ENTITY	OR		R.THAN
Z Ai	AFTER AEHDNEHT	PREVIOUSLY PAID FOR	EXTE	RATE	ASDA FICHAL FEE	/	RATE	ADDA AMCIÎ :
Tota.	O - Minus	مله" ا	- /	X g · a		56	 X1 #	- 1
Z stegenten: LL stroff i stan	A Minus	3	-	X S = -				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLANS 197 CER : 1/2						CR '	x s=	/
421		· · ·	<i>f</i>	TOTAL	/	1	TOTAL .	/
HM/V "	olumn 1)		· .	ADD L FEE		OR	ADD'L FEE	
m l	CLAIMS	(Column 2)	(Column 3)			\		
517-8-06	MAINING AFTER	NUMBER PREVIOUSLY	PRESENT	RATE	ADDI-	1	RATE	ADDI
Total D7 CFR 1.18(e)	ENDMENT Minus	PAID FOR	-		FEE	٠. ٠ [TICLA. FEE
Z independent (37 CFR 1.16(b))	Minus	20	-	X 5=		OR	x.ss	
₹	Ø.			x s=		OR	x s=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1/16(d))								
			•	TOTAL ADDILFEE		OR .	ADDL FEE	
, , , , , , , , , , , , ,	ournn 1).	(Column 2)	(Cotur - 3)		·		المحرود آ	
- ا	Military	II-MBEK	PALSE	RATE	ADDI:	1		. I.
Δ A165	NDMENT	PAID FOR	EATRA	100.10	TIONAL	j	Pát::	دحن. TIOHAL
C Lancest Clause	Minus	••	2		FEE	-		FEE
	Vinia	···		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		OR _	x 5=	
E PET PRESENTATION	X ! =		25	× : =				
		C16 (** *				. · · [·	
	i germaning palegya.	an da laten 1 - 100		<u>.</u>			· · · · · · L	
V Caller L	: Partious , Paid For Previously Paid For 1	117 - C CO 1715		nter 30			_	
*** ** **	Const. Public	いっさい ひかんしゃ かいけいしい	e wygen grif i war. Titother trans	er s Grander og skriver				1

USPTQ to process) an application. Confidentiality is governed by 35 U.S. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for additionable.

Weight Send 1D. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form call 1-800-PTO-9:99 and select op:---